

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application No.	10/813,731
Filing Date	March 30, 2004
First Named Inventor	Erik R. Swenson
Group Art Unit	2616
Examiner Name	Raj K. Jain
Attorney Docket Number	2717P167

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with Customer Number:

45220

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

08791

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip Code

Country

Telephone

Fax

I am the:

☐ Applicant.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under of 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Diane Honda - Extreme Networks VP, General Counsel & Secretary

Signature

Date

4.8.10

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.